

## **Emergency Drought**

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

State of Washington
Application for a Water Ri



For Ecology Use
Fee Paid 12

Date 3/17/05

Ck# 000557

Application for a Water Right Please follow the attached instructions to avoid unnecessary delays.

Name SARL HILLOBES	Home Tel:(509)588 - 4629
Name SARL HI LOBES  Mailing Address 14306 Cer ACOI	
City BENTON CITY State WH. Zip+4 993	320 8691 FAX: (509 588- 4509
Section 2. CONTACT - PERSON TO CAL  Same as above	LABOUTTHE APPLICATION
Name	Home Tel:(
Mailing Address	Work Tel:()
City State Zip+4	+FAX:()
Relationship to applicant	
Section 3. STATEMENT OF INTENT	
· ·	ground water source (check only one) for the purpose(s)
	oject. Indicate the period of time that the water will be needed:
Section 4. WATER SOURCE	
If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for well(s).  # 1 EXISTING  #2 NEW WELL TO be chilled
Number of diversions:	8"
Source flows into (name of body of water):	Size & depth of well(s):#1 B" 575 feet proposed #2 6" cleptle unde tensived
LOCATION	proposed #2 6, clepte unde tensinel
Enter the north-south and east-west distances in feet fresection corner:	rom the point of diversion or withdrawal to the nearest
以 of Section Township Range(E/W	If location of source is platted, complete below:  Lot Block Subdivision
#1 NW SE 35 10N 24E	Sec.
#2 NW SE 35 10N 26E	BENTON
For Ecology Use Date Received: MARCH 17, 2005 Price SEPA: Exempt/Not Exempt FERC License #	Dept. Of Health #
Date Accepted As Complete 3/17/05 By Date	te Returned By WRIA:

64-34507

ECY 040-1-14 Rev. 7/01 \* \* f **APPLICATION** 

Appl. No.: 64-34507-05

A.	Name of system, if named: NONE
B. #ス	Briefly describe your proposed water system. (See instructions.) The proposed new well would be pumping into our existing main live and submain for irrigation of Trees and alpolfor, for irrigation of Trees and alpolfor, less for conservation our last 25 acres planted are watered by drip lines and so will any future plantings.
C.	Do you already have any water rights or claims associated with this property or system?  PROVIDE DOCUMENTATION.
	ion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION inpleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.)
B.	Are you within the area of an approved water system?   If yes, explain why you are unable to connect to the system.   Note: Regional water systems are identified by your County Health Department.
Comp	olete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health?  If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan?  If yes, when was it approved? Please attach the current approved version of your plan.
114100000000000000000000000000000000000	ion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION inplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 216
B.	List total number of acres for other specified agricultural uses:
	Use         Acres           Use         Acres           Use         Acres
C.	Total number of acres to be covered by this application: 216
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977)  Add up the acreage in which you have a controlling interest, including only:  ‡ Acreage irrigated under water rights acquired after December 8, 1977;  ‡ Acreage proposed to be irrigated under this application;  ‡ Acreage proposed to be irrigated under other pending application(s).
	<ol> <li>Is the combined acreage greater than 6000 acres?</li> <li>Do you have a controlling interest in a Family Farm Development Permit?</li> <li>If yes, enter permit no:</li> </ol>
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking

## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

YES NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

applica	ation from the Department of Ecology.
	tion 9. DRIVING DIRECTIONS
Ro	de detailed driving instructions to the project site.  WY 82 E TO BENTON CITY, go all the way to  WY 82 E TO BENTON CITY, go all the way to  Orth End of Town on main Road (HORN RD)  Orth End of Town on main Road (HORN RD)  R 225) at mile post 4 twrn left and Accord & E Roz  ad. approx 1/2 mile to 14306 at accord & E Roz  d. Look to right for twin Silos and poplar Entry  tion 10. REQUIRED MAP
A.	Attach a map of the project. (See instructions.)  See attachment of A
Seci	tion 11. PROPERTY OWNERSHIP
Α.	Does the applicant own the land on which the water will be used?  If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):
В.	Does the applicant own the land on which the water source is located?  If no, submit a copy of agreement:  YES □ NO
to pro monit emplo	ify that the information above is true and accurate to the best of my knowledge. I understand that in order ocess my application, I grant staff from the Department of Ecology access to the site for inspection and oring purposes. Even though I may have been assisted in the preparation of the above application by the oyees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.
Applic	Pant (or authorized representative)  Date

Landowner for place of use (if same as applicant, write "same")

Use this page to continue your answers to any questions on the application. Please indicate section number before answer. we would like to drill a new well and Obandon the old one (well# 1) since it's Capacity has dropped from 180-200 GPH to SO GPM Well #1 ID AGG 519 Water Percent # 64 - 34507 W 135487 W 135087 one proposed well #3 we seek pennission to go to greater depth if adequate water can not be found at lower levels. We are returning your application for the following reason(s): APPLICANT PLEASE RETURN Examination fee was not enclosed TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128 APPLICANT PLEASE RETURN Section number(s) is/are TO THE APPROPRIATE incomplete **REGIONAL OFFICE** Explanation: Please provide the additional information requested above and return your application by \_ (date). Ecology staff Date

Ecology is an Equal Opportunity employer. To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).